

ALLEGHANY FARMERS MARKET APPLICATION

Name:	
Address:	
Telephone Number:	
Email Address:	
Website/FB/Instagram link:	
Product(s) Sold:	
Are you interested in selling produce, meat, dairy or value-added p Yes No	
Does your product require a kitchen inspection? Yes _	NoNot Sure
Proof of inspection provided? Yes No	
I have thoroughly read, understand and agree to the Alleghany Far	rmers Market Policies & Procedures
FOR OFFICE USE ONL	LY
Amount paid:	
Date of Receipt:	
Regulatory paperwork received: Date:	